

Statement of Organization - Candidate Committee

Amendment
☐ Yes ☒ No

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

1. Committee Information			
a. Full Name		c. ID Number	
Friends for Jerry Monette		5CD60C	
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
P.O. Box 3011 New Bern, N.C. 28564		2/10/2014	
		e. Phone Number	
		252-638-1817	
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		e. Candidate ID Number	f. Party Affiliation
Jerry Glenn Monette			Democrat
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
P.O. Box 3011 New Bern, N.C. 28564		Craven County Sheriff	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
252-638-1817	monettejerry@yahoo.com		
<input type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Jerry Glenn Monette		Jerry Glenn Monette	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
P.O.Box 3011 New Bern, N.C. 28564		P.O. Box 3011 New Bern, N.C. 28564	
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
252-638-1817	monettejerry@yahoo.com	252-638-1817	monettejerry@yahoo.com
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email copy of notices	
5. Assistant Treasurer Information		6. Account Information (incl. CRO-3500)	
a. Full Name		a. Financial Institution Full Name	
		Branch Bank & Trust	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		Campaign Account	
c. Phone Number	d. Email Address	c. Account Code	d. Type
		1	Checking
<input type="checkbox"/> Email copy of notices			
CERTIFICATION			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct.			
Jerry Glenn Monette		2/10/2014	
Printed Name of Signer		Date	
		Signature of Appointed Treasurer	



North Carolina
State Board of Elections

441 N Harrington Street
Raleigh, NC 27603

Kim Westbrook Strach
Executive Director

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173
Fax: (919) 715-8047

Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

FILED BY:

FEB 10 2014

Candidate Name: Jerry Glenn Monette

Treasurer Name: Jerry Glenn Monette

Treasurer Address: 4250 Wilcox Road

(include city, state, & zip) New Bern, N.C. 28562

Treasurer Phone: 252-638-1817

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

02-10-2014

Date Signed


Signature of Candidate

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.